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## BIB DATA SHEET

CONFIRMATION NO. 9889

<b>SERIAL NUMBER</b> 10/565,442	<b>FILING or 371(c) DATE</b> 07/05/2006 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1618	<b>ATTORNEY DOCKET NO.</b> 0528-1167	
<b>APPLICANTS</b> Laurence Hermitte, Luynes, FRANCE; Olivier Benoit, Annecy, FRANCE; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/FR04/02052 07/30/2004 <b>** FOREIGN APPLICATIONS *****</b> FRANCE 0309401 07/30/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 07/26/2006					
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /NISSA M Acknowledged WESTERBERG/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWINGS</b> 1	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> YOUNG & THOMPSON 209 Madison Street Suite 500 ALEXANDRIA, VA 22314 UNITED STATES					
<b>TITLE</b> Complex matrix for biomedical use					
<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		